



NASDAQ: LUNG
May 2021



Forward Looking Statement

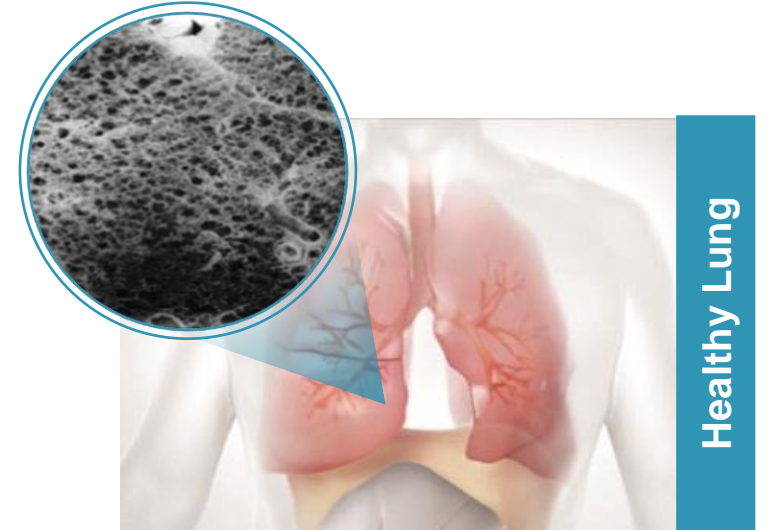
This presentation and certain statements made during this presentation contain forward-looking statements that involve risks and uncertainties. Forward-looking statements are neither historical facts nor assurances of future performance. Instead, they are based on our current expectations and projections about future events and financial trends that we believe may affect our financial condition, results of operations, business strategy, and financial needs. All statements other than statements of historical facts contained in this presentation, including any statements regarding our ability to design, develop, manufacture and market innovative products to treat patients with challenging medical conditions, particularly those with chronic obstructive pulmonary disease (COPD) and emphysema; our expectations regarding the impact of the COVID-19 pandemic on our business; our expected future growth; our expected future growth of our company; the size and growth potential of the markets for our products, and our ability to serve those markets; any projections of financial information, market opportunities, profitability, or financial position; the rate and degree of market acceptance of our products; coverage and reimbursement for procedures performed using our products; our ability to obtain and maintain regulatory approval or clearance of our products on expected timelines; our plans to research, develop and commercialize our products and any other approved or cleared product; our ability to retain and hire our senior management and other highly qualified personnel; the development, regulatory approval, efficacy and commercialization of competing products; our future financial performance and capital requirements; and our expectations regarding our ability to obtain and maintain intellectual property protection for our products are forward-looking statements. The words “may,” “will,” “should,” “expect,” “plan,” “anticipate,” “could,” “would,” “intend,” “target,” “project,” “estimate,” “believe,” “estimate,” “predict,” “potential” or “continue” or the negative of these terms or other similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words. Factors that could cause actual results to differ materially from those contemplated in this presentation can be found in the Risk Factors section of Pulmonx’s public filings with the Securities and Exchange Commission (“SEC”), including the Annual Report on Form 10-K, filed with the SEC on March 15, 2021, available at www.sec.gov. Because forward-looking statements are inherently subject to risks and uncertainties, you should not rely on these forward-looking statements as predictions of future events. All statements other than statements of historical fact are forward-looking statements. Except to the extent required by law, the Company undertakes no obligation to update or review any estimate, projection, or forward-looking statement. Actual results may differ from those set forth in this presentation due to the risks and uncertainties inherent in the Company’s business.

Investment Highlights



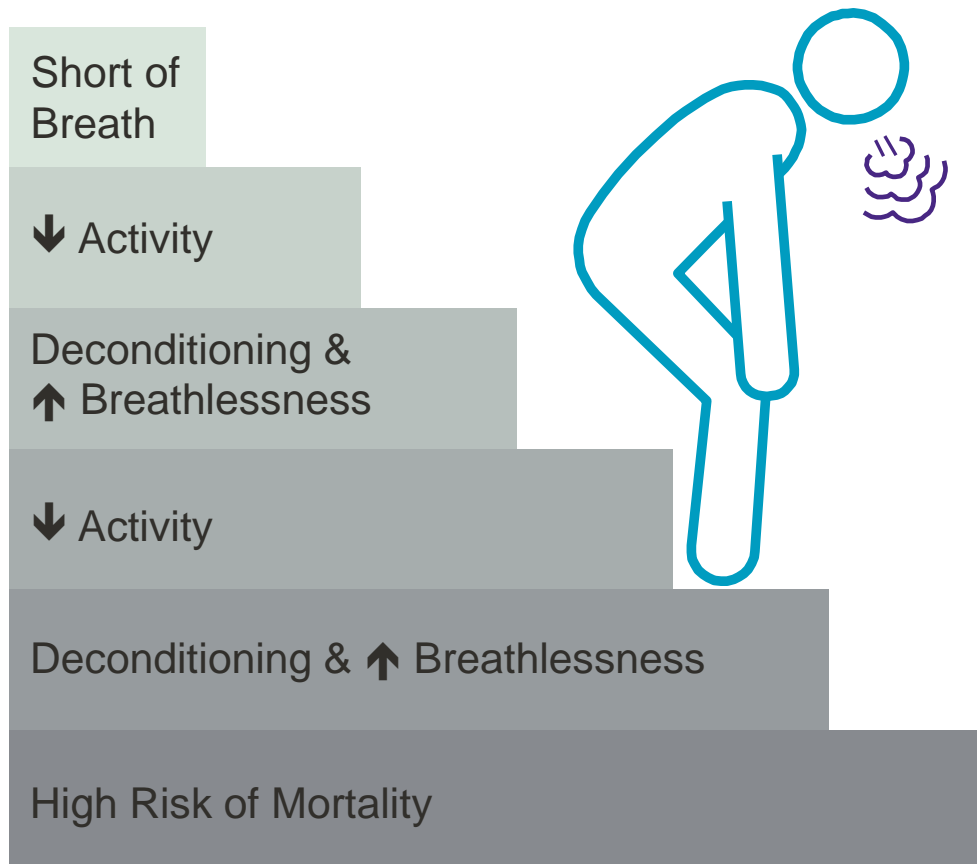
COPD and Emphysema: A Prevalent Disease with High Unmet Medical Needs

- Emphysema is a form of Chronic Obstructive Pulmonary Disease (COPD) resulting in the progressive destruction of lung tissue
- Accounts for ~25% of all COPD patients¹
- Air-trapping causes increasing lung volume and persistent breathlessness
- COPD is among the leading causes of death worldwide
- ~\$49B in expected direct U.S. medical costs attributable to COPD in 2020²



Emphysema Disease Progression

! Hyperinflation



- Significant breathlessness drives downward spiral¹
- Quality of life generally worse than for patients with lung cancer²
- High mortality risk³



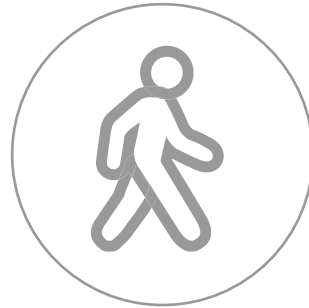
Spectrum of Treatment Options

Medical Management



Non-invasive
Limited effect in severe patients

Pulmonary Rehabilitation



Non-invasive
Difficult to sustain benefits

Zephyr® Valves

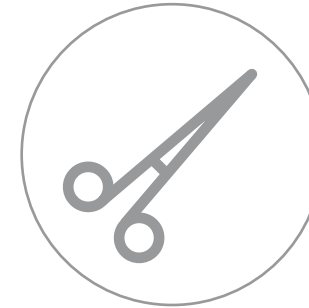


Designed to Provide Benefits Similar to Surgery with Broader Eligibility

Minimally Invasive

Fully Removable

Lung Volume Reduction Surgery



Invasive
Effective
>5% risk of death
Not an option for most patients

Lung Transplant



Invasive
Effective
5-15% risk of death
Not an option for most patients

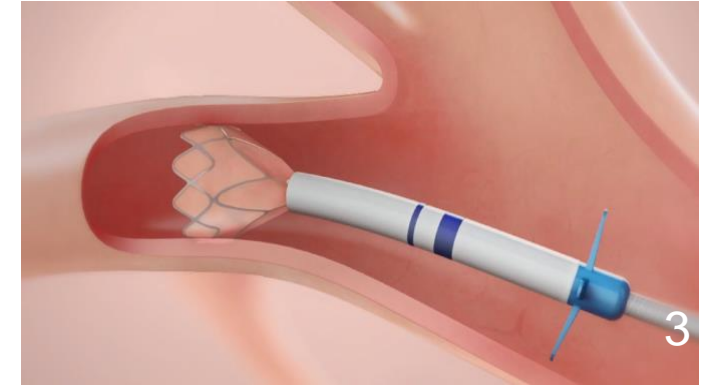
How Zephyr® Valves Work



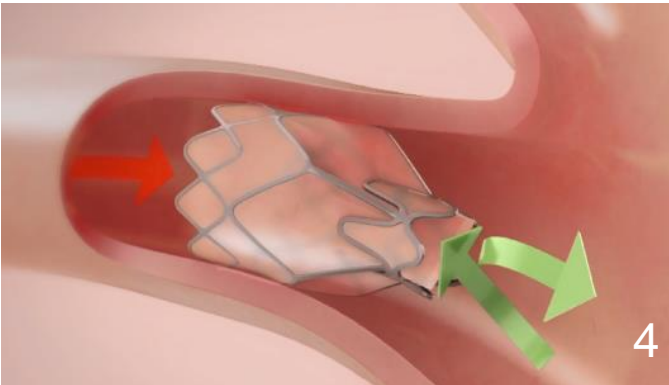
Bronchoscope introduced into lungs of patient with diseased, hyperinflated lobe



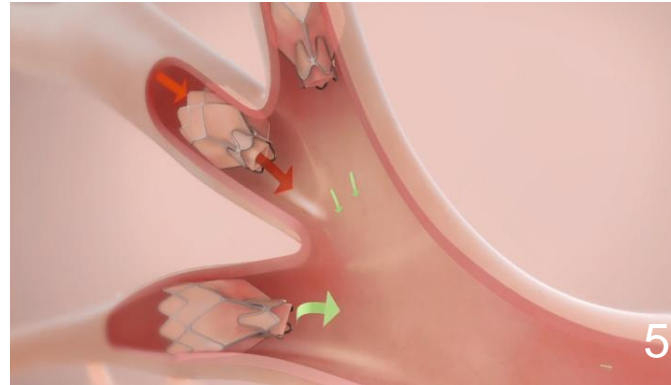
Delivery catheter advanced into target lobe through bronchoscope



Valve size chosen in one step procedure and delivered to seal target airway



Zephyr® Valve allows trapped air to escape but not to re-enter



An average of 4 **Zephyr® Valves** delivered to fully occlude diseased lobe



Hyperinflation in target lobe is reduced, improving lung function and breathlessness

The Zephyr Valve Patient Journey

Standard COPD
Work Up

StratX® Report

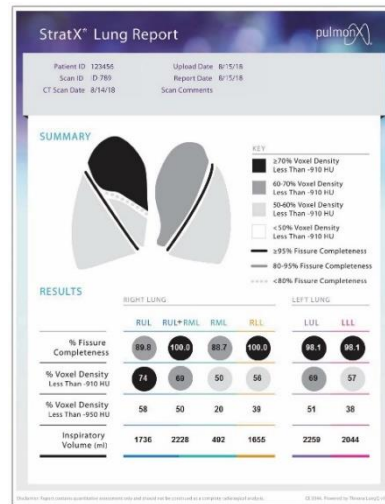
Chartis®
Assessment

Zephyr® Valves
Placed

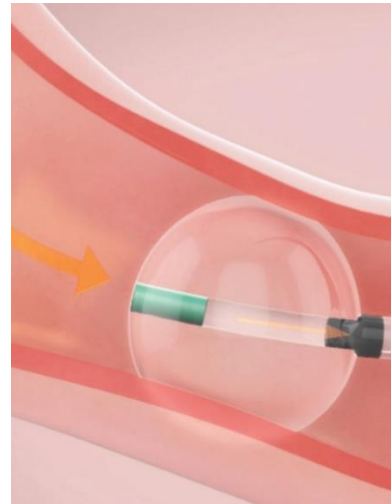
3 Night
Stay



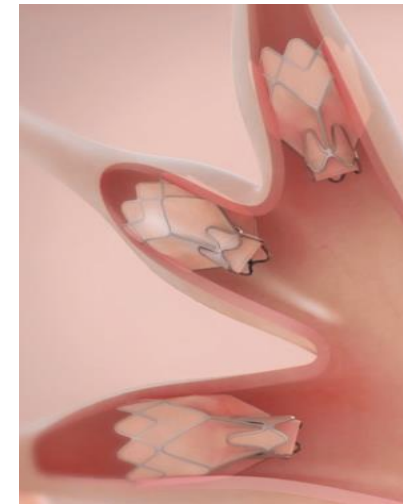
Patient undergoes standard pulmonary work up, including pulmonary function testing and CT scan



CT scan uploaded to cloud, generating report to help identify one or more eligible lobes for treatment



Patient sedated & Chartis® procedure simulates valve placement with a balloon catheter in target lobe(s) to test for collateral ventilation



Bronchoscopic placement of **Zephyr® Valves** in less than an hour procedure



Patient remains in the hospital for monitoring for a minimum of 3 nights following the procedure

Collateral Ventilation: A Key Exclusion Criteria

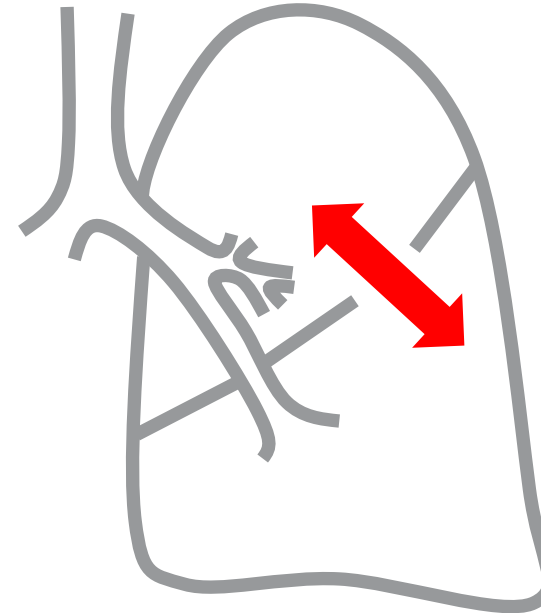
No Collateral Ventilation (CV-)

- ✓ Complete lobar fissures
- ✓ Normal air passage
- ✓ Eligible for procedure



Collateral Ventilation (CV+)

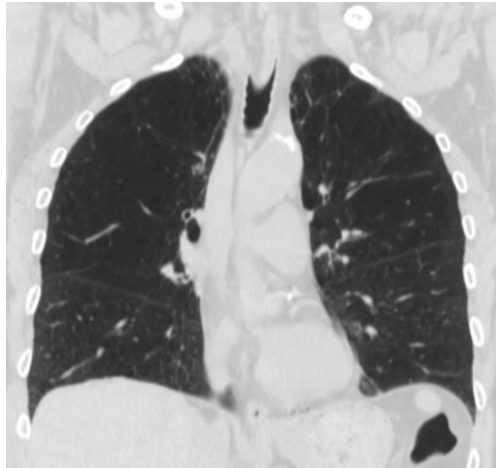
- ✗ Incomplete lobar fissures
- ✗ Bypassing of normal airways
- ✗ ~50% of severe emphysema patients



Patient Screening is Critical for Optimal Patient Selection

StratX[®] Analysis Helps Determine Eligible Lobes

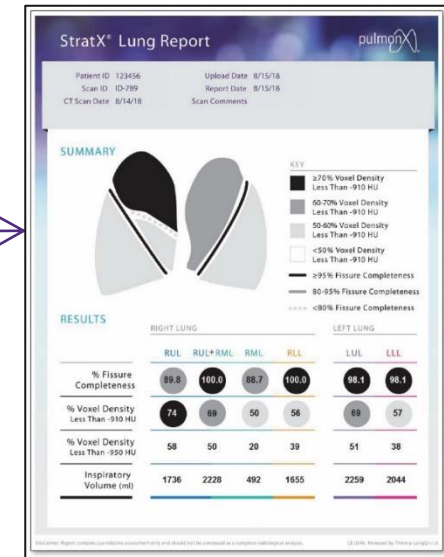
CT Scan



Cloud Upload



StratX Report



- Cloud-based quantitative analysis of CT Scan
- First line evaluation for:
 - Volume
 - Tissue Destruction
 - Fissure completeness – an indicator for collateral ventilation
- Identifies potential lobe(s) for Chartis[®] Evaluation and **Zephyr[®] Valve** treatment

Chartis[®] System: Proprietary CV Testing for Patient Eligibility

Physiological Measure of Collateral Ventilation

- Evaluates the presence or absence of collateral ventilation
- Measures changes in pressure and airflow
- Unique, patent protected technology



Consistent Outcomes Across Four Randomized Trials

AMERICAN JOURNAL OF
Respiratory and
Critical Care Medicine

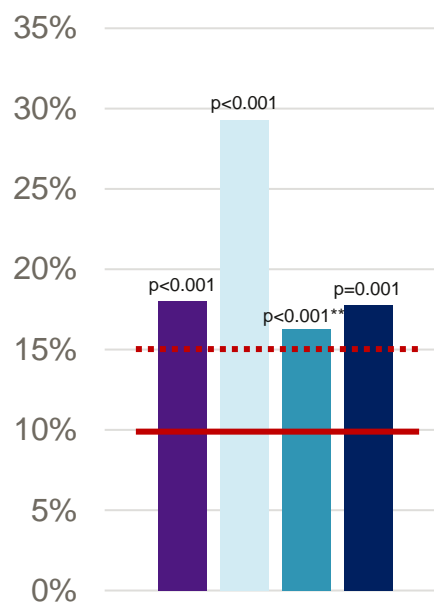
AMERICAN JOURNAL OF
Respiratory and
Critical Care Medicine

AMERICAN JOURNAL OF
Respiratory and
Critical Care Medicine

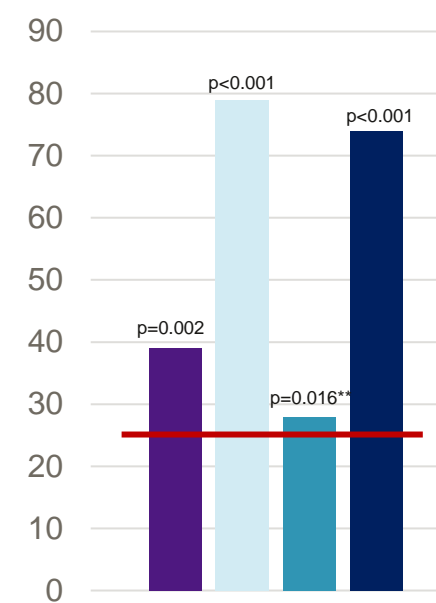
THE NEW ENGLAND
JOURNAL OF MEDICINE

RCT	Size & Follow-up	Procedural Success (TLVR%) ⁵
LIBERATE¹	N = 190 12 Mo	84%
TRANSFORM²	n = 97 6 Mo	90%
IMPACT³ **	n = 93 6 Mo	89%
STELVIO⁴ *	n = 68 6 Mo	88%

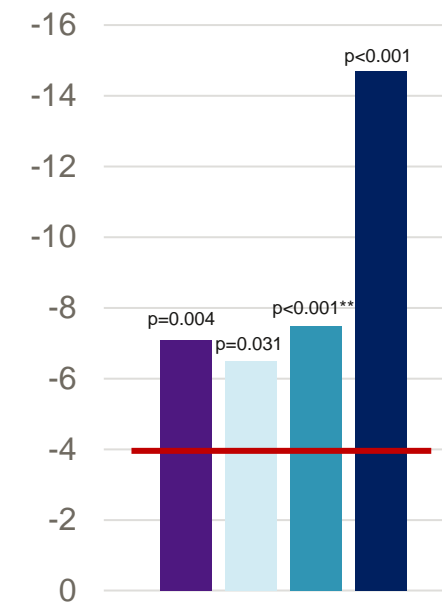
Lung Function Improvement vs Control (FEV1%)[†]



Exercise Capacity Improvement vs Control (6MWD)[†]



Quality of Life Improvement vs Control (SGRQ)[†]

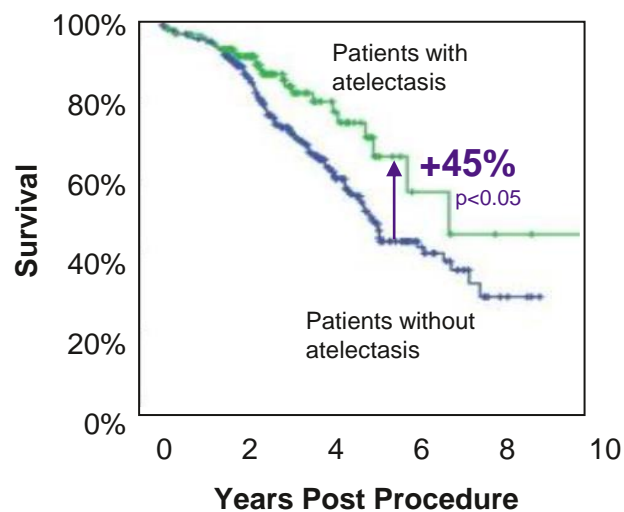


Minimal Clinically Important Difference

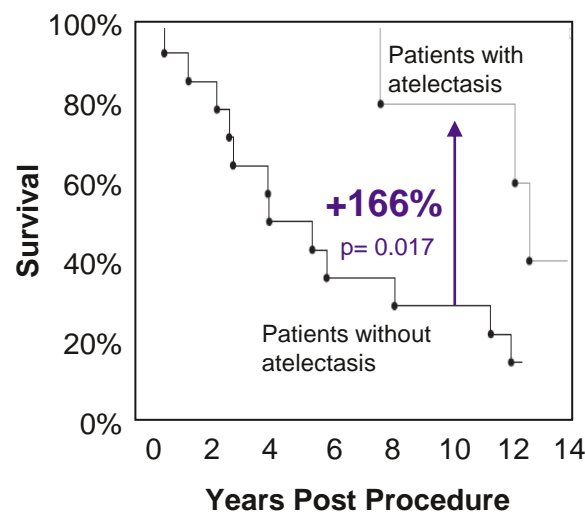
100+ scientific articles published on the clinical benefits of Zephyr Valves

Data Suggesting Long-Term Benefits

Retrospective Analysis of Long-Term Survival Following Successful Lung Volume Reduction (Atelectasis) ^{1,2}

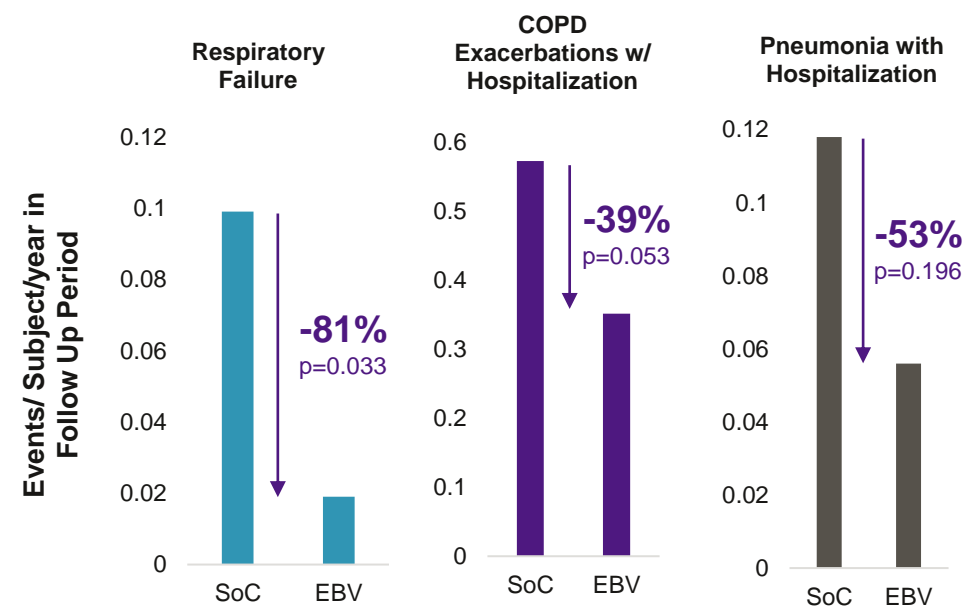


At 5 years following valve treatment, patients with atelectasis were **~45% more likely to survive** than patients without (n=449)



At 10 years after treatment with endobronchial valves, patients with atelectasis were **~166% more likely to survive** than patients without (n=19)

Trend Toward Lower Long-Term Respiratory SAEs Vs. Control³



Reprinted with permission of S. Karger AG, Basel and Respiration. Copyright © 2020 S. Karger AG, Basel. Respiration is an official journal of the Swiss Respiratory Society and the European Association for Bronchology and Interventional Pulmonology.

Reprinted with permission of the American Thoracic Society. Copyright © 2020 American Thoracic Society. The American Journal of Respiratory and Critical Care Medicine is an official journal of the American Thoracic Society.

Acceptance Driven by Strength of Clinical Data

The logo of the U.S. Food and Drug Administration (FDA) in white text on a blue square background.

Expedited approval
on June 29, 2018
following
breakthrough
designation

Recent
Inclusion in
COPD
Guidance



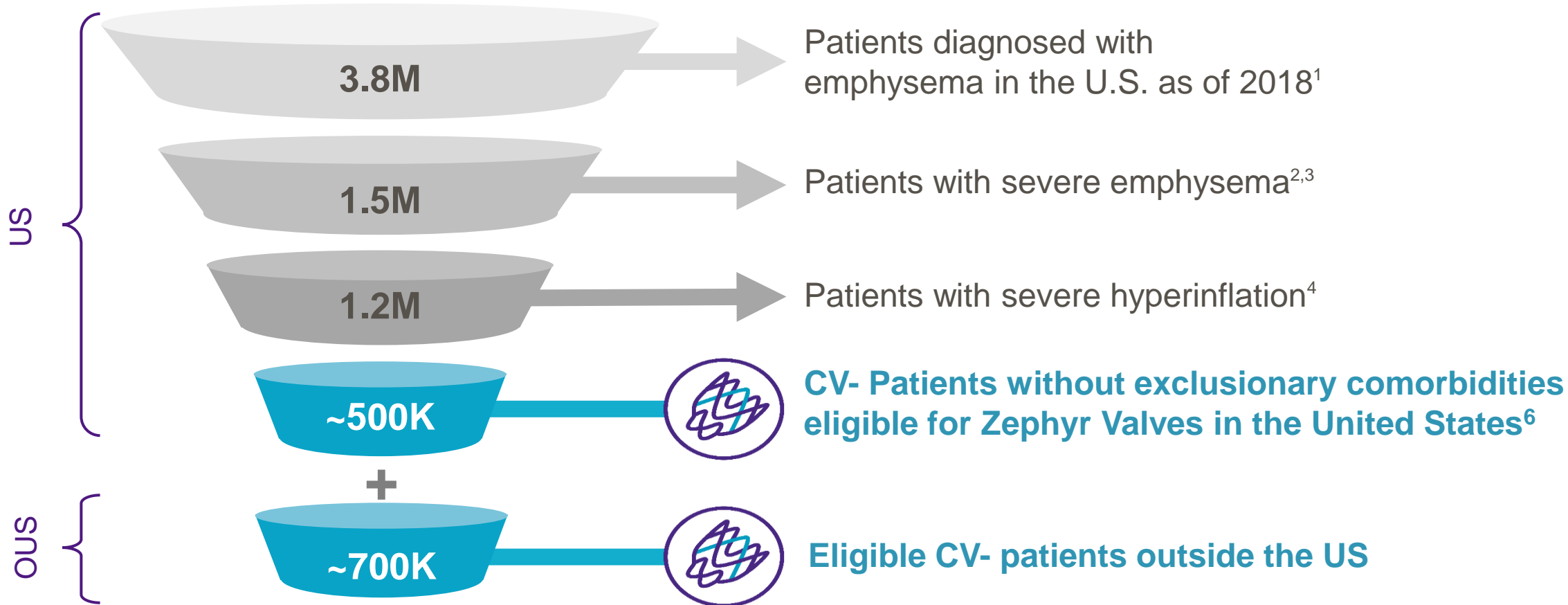
Zorginstituut Nederland



THE **COPD** POCKET CONSULTANT
COPD Foundation Guide for Management of COPD

Recent increase to
Evidence **Grade A**

\$12B Global Opportunity for Zephyr® Valves

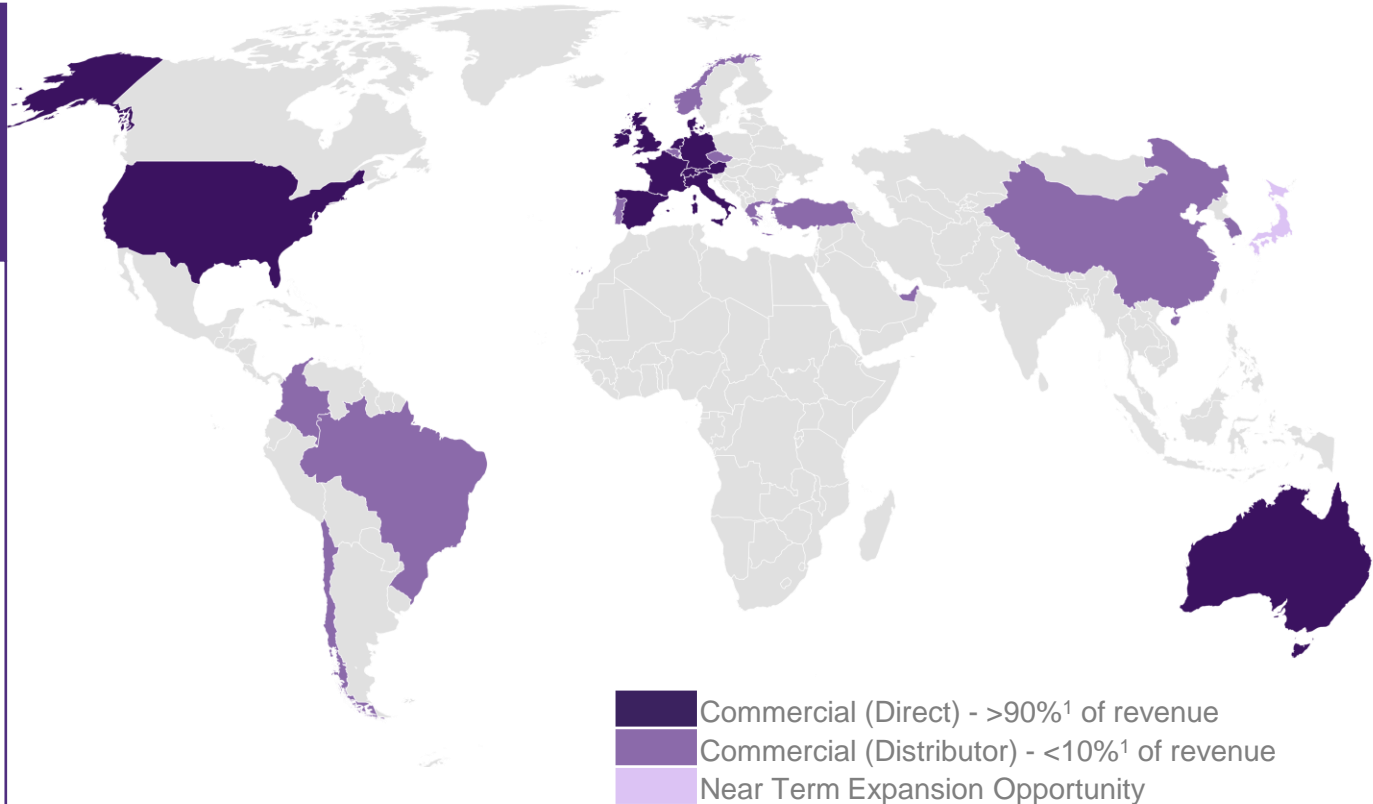


Estimated 10% incidence per year⁵

Established Global Footprint

Zephyr® Valves Available in >25 Countries¹

- Predominantly direct sales model with **> 90% of sales direct¹**
- **79 global sales representatives¹**
 - 51 in US
 - 28 OUS
- Significant market expansion opportunities



Efficient U.S. Commercial Strategy



~500

Initial U.S. Hospital Targets



~800

Initial U.S. Pulmonologist Targets

U.S. Sales Force of 51 Territory Managers¹

Comprehensive Market Development Strategy

1. Increase centers of excellence capability & capacity



2. Increase referral network activity



3. Increase volume and reduce cost of patient self referrals

U.S. Reimbursement in Place

Coding

- Category I CPT® codes physician billing
- ICD-10 procedure codes for hospital payment

Coverage / Payer Mix

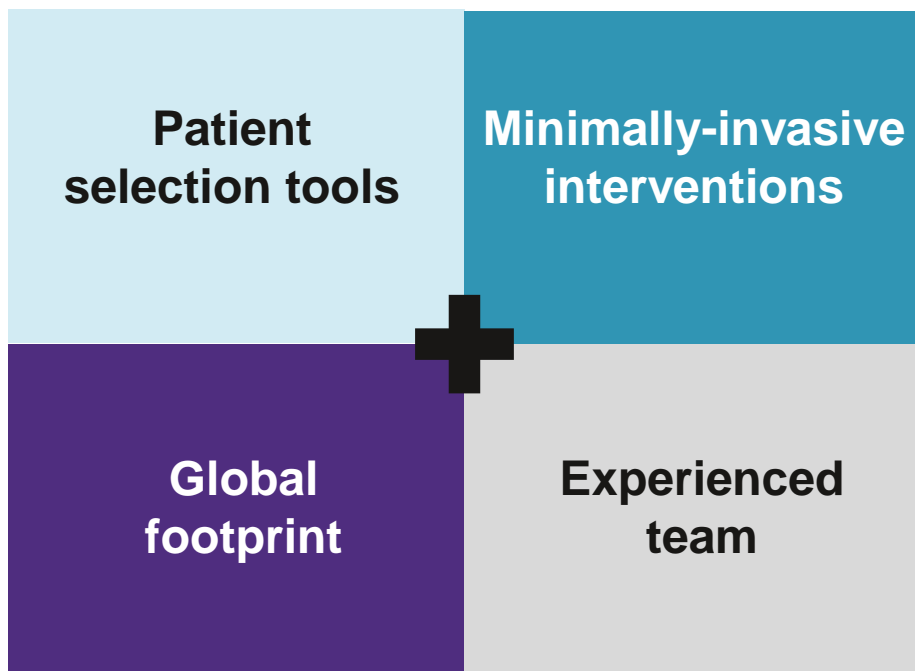
- ~50% Traditional Medicare / Medicaid
- ~25% Managed Medicare / Medicaid
- ~25% Commercial
 - Expanding Commercial coverage
 - ✓ Aetna
 - ✓ Humana
 - ✓ United
 - ✓ HCSC
 - Preauthorization approvals from major payors (>90%)

Payment

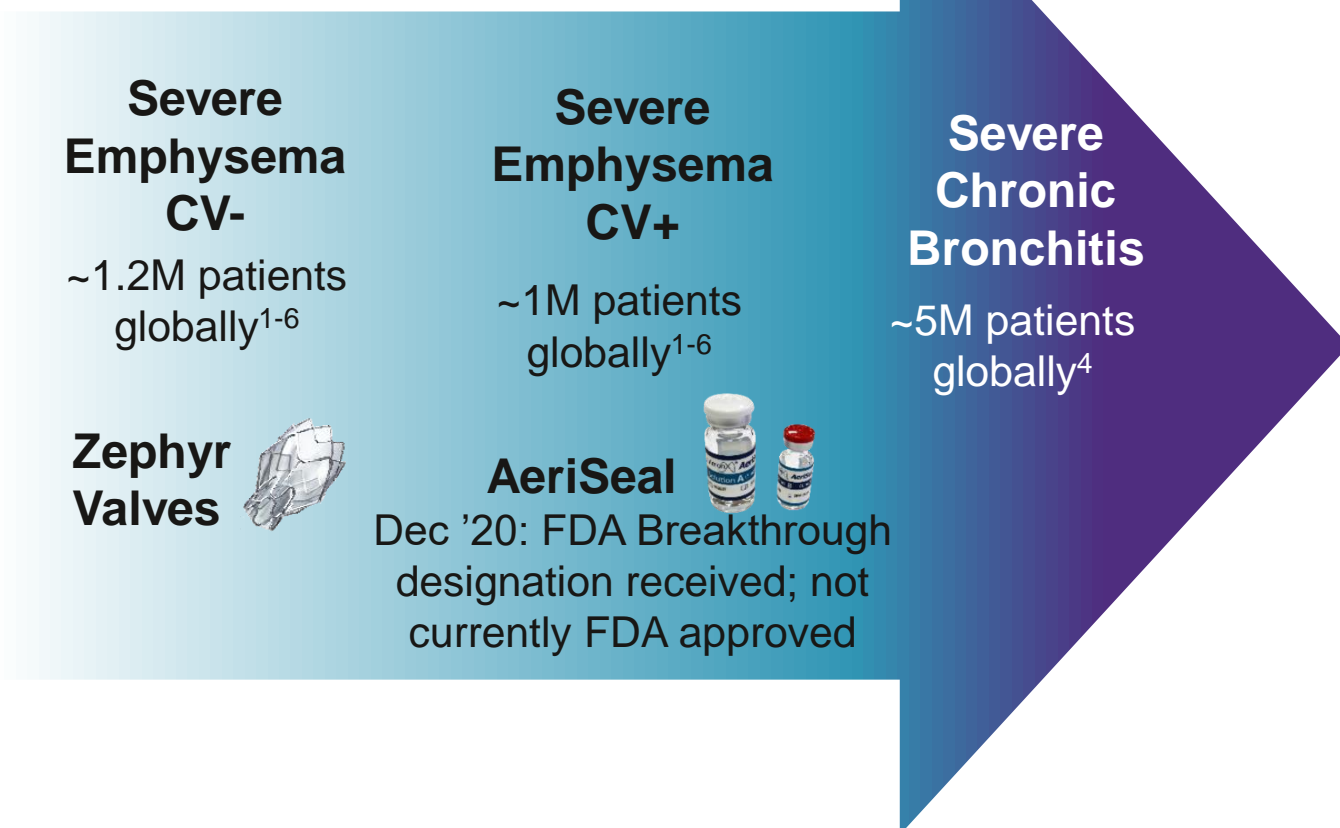
- Established physician payment
- Appropriate hospital payments
 - MS-DRGs 163, 164, 165 (Major Chest Procedures) pay facilities \$11K-30K¹
 - APC 5155 for Chartis® procedure when valves not placed, pays facilities ~\$5K²

Vision: Build a Leading Interventional COPD Company

Category Leadership



Severe COPD Interventions



Financial Summary

Revenue

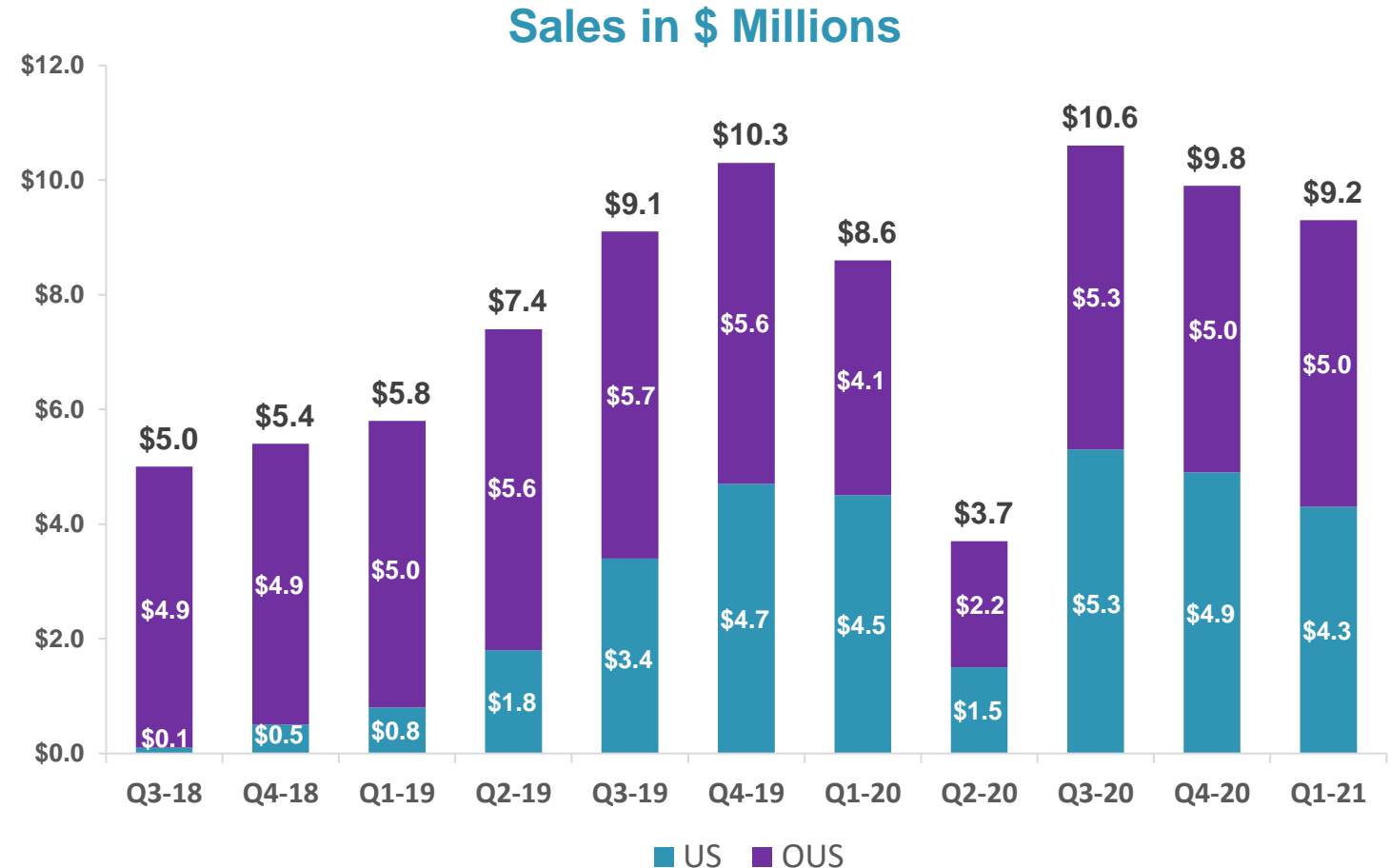
- \$9.2 million in 1Q21
 - US: \$4.3 million
 - OUS: \$5.0 million

Gross Margins

- 71.5% in 1Q21

Cash Position

- \$221.6 million in cash, cash equivalents, and marketable securities as of 3/31/2021





Thank you